Image# 14961579085 PAGE 1 / 20

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
AX PAC			1
ADDRESS (number and street)	PO Box 538		
Check if different			
than previously reported. (ACC)	Wausau		WI 54402 -
2. <b>FEC IDENTIFICATION N</b>	UMBER ▼ CI	ITY 🛦	STATE ▲ ZIP CODE ▲
C C00506535		IS THIS REPORT X (N) O	AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Fell Report Due On:	b 20 (M2) May 20 (M	Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Ma	ar 20 (M3) Jun 20 (M	Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
April 15	Ар	or 20 (M4) Jul 20 (M7	7) Oct 20 (M10) Jan 31 (YE)
Quarterly Report (0	Q1) (c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
X July 15 Quarterly Report (0	Q2) PRE-Election Report for the:	Convention (12C)	Special (12S)
October 15 Quarterly Report (6			
January 31 Year-End Report (	FI	ion on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	on (d) 30-Day POST-Election	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)		ion on	in the State of
5. Covering Period 0	4 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	through 06	M / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined the	his Report and to the best c	of my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasure	er Kate Lind		
Signature of Treasurer Kate	e Lind	[Electronically Filed]	Date 07 / 14 / 2014
NOTE: Submission of false, error	neous, or incomplete information	on may subject the person signin	g this Report to the penalties of 2 U.S.C. §437g.
Office			FEC FORM 3X
Use Only			Rev. 12/2004

## SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name **AX PAC** 04 2014 06 30 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 7157.45 January 1, 2014 (b) Cash on Hand at 18348.82 Beginning of Reporting Period..... 53789.00 29539.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 47887.82 60946.45 6(a) and 6(c) for Column B)..... 29022.23 42080.86 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 18865.59 18865.59 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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Αл	. 1	А	C

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:	-	
(a) Individuals/Persons Other		
Than Political Committees	750.00	2000 00
(i) Itemized (use Schedule A)	750.00	3000.00
(ii) Unitemized	789.00	789.00
(iii) TOTAL (add	, 100.00	
Lines 11(a)(i) and (ii)▶	1539.00	3789.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	28000.00	50000.00
(such as PACs)(d) Total Contributions (add Lines	7	000000
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	29539.00	53789.00
Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	0.00
All Loans Received	0.00	0.00
	200	
Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures		
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made	7 7	7 7
to Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
Transfers from Non-Federal and Levin Funds	, , , , , , , , , , , , , , , , , , , ,	
(a) Non-Federal Account	0.00	
(from Schedule H3)	0.00	0.00
	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(b) Total Transists (dad Total dila Total).		0.00
Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	29539.00	53789.00
_		
Total Federal Receipts		2,200
(subtract Line 18(c) from Line 19) ▶	29539.00	53789.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: ————————————————————————————————————	Total Tino I criou	Calelidai Teal-to-Date
Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non Endard Chara	0.00	0.00
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00
Expenditures	11022.23	18580.86
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))▶	11022.23	18580.86
Transfers to Affiliated/Other Party	0.00	0.00
Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	15000.00	20500.00
Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other		0.00
Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Defined		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00
(add Lines 20(a), (b), and (c))		
Other Disbursements	3000.00	3000.00
Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(") III - 1 II Ob - 1	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add		
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	29022.23	42080.86
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	29022.23	42080.86

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	29539.00	53789.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	29539.00	53789.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	11022.23	18580.86
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	11022.23	18580.86

### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF 20 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) **AX PAC** Full Name (Last, First, Middle Initial) Karry K La Violette Date of Receipt Mailing Address 3316 Martha Custis Drive 2014 06 03 City Zip Code State Transaction ID: SA11AI.4340 VA Alexandria 22302 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Contribution Name of Employer Occupation NCPA Senior Director Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Valerie Nelson Date of Receipt Mailing Address 649 G Street SE #106 06 25 2014 City State Zip Code Transaction ID: SA11AI.4367 DC Washington 20003 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Contribution Name of Employer Occupation **Dentons** Sr Managing Director Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Nicole Vernon Date of Receipt Mailing Address 4630 31st Road South 06 03 2014 Zip Code City State Transaction ID: SA11AI.4334 Arlington VA 22206 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Contribution Name of Employer Occupation The Boeing Company **PAC Manager** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 750.00 SUBTOTAL of Receipts This Page (optional)..... 750.00 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 OF 20 (check only one)								
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17								
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  AX PAC										
Full Name (Last, First, Middle Initial)  AMERICAN HOSPITAL ASSOCIATIO  Mailing Address 325 SEVENTH STREET, NW  SUITE 700  City  WASHINGTON  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary  General  Other (specify)	N PAC  State Zip Code DC 20004  C C00106146  Occupation  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
Full Name (Last, First, Middle Initial)  AMERICAN INSTITUTE OF CERTIFIED PUBLIC AC  Mailing Address PALLADIAN 1  220 LEIGH FARM RD  City  DURHAM  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary  General  Other (specify)	State Zip Code NC 27707  C C00077321  Occupation  Aggregate Year-to-Date ▼  2500.00	Date of Receipt  06 26 2014  Transaction ID: SA11C.4439  Amount of Each Receipt this Period  2500.00  Contribution								
Full Name (Last, First, Middle Initial) AMERICAN RESORT DEVELOPMENT ASSOCIATION  Mailing Address 1201 15TH STREET NW 4TH  City WASHINGTON  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	, ,	Date of Receipt  06 27 2014  Transaction ID: SA11C.4364  Amount of Each Receipt this Period  5000.00  Contribution								
SUBTOTAL of Receipts This Page (optional)	•	8500.00								
TOTAL This Period (last page this line number of	nly)									

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 20 (check only one)  11a
Any information copied from such Reports and S or for commercial purposes, other than using the			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) AX PAC			
Full Name (Last, First, Middle Initial)  FMR LLC POLITICAL ACTION COM  Mailing Address 82 DEVONSHIRE STREET  N5A  City  BOSTON  FEC ID number of contributing federal political committee.  Name of Employer	State MA	Zip Code 02109	Date of Receipt  06 03 2014  Transaction ID : SA11C.4350  Amount of Each Receipt this Period  2000.00  Contribution
Receipt For:  Primary General  Other (specify) ▼		∕ear-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial)  GENERAL ELECTRIC COMPANY POLI  Mailing Address 1299 PENNSYLVANIA AVE N SUITE 900  City  WASHINGTON  FEC ID number of contributing federal political committee.  Name of Employer	State DC	Zip Code 20004	Date of Receipt  06 15 2014  Transaction ID : SA11C.4363  Amount of Each Receipt this Period  1000.00  Contribution
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	/ear-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial)  GENERAL ELECTRIC COMPANY POLITION  Mailing Address 1299 PENNSYLVANIA AVE I SUITE 900  City WASHINGTON  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify)	State DC Coo	N COMMITTEE (GEPAC)  Zip Code 20004  024869  /ear-to-Date ▼	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional)			4500.00

TOTAL This Period (last page this line number only).....

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 OF 20 (check only one)								
IT _	EMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17								
	y information copied from such Reports and Sta for commercial purposes, other than using the r											
	NAME OF COMMITTEE (In Full) AX PAC											
Α.	Full Name (Last, First, Middle Initial) INTERCONTINENTALEXCHANGE INC	PAC		Date of Receipt								
	Mailing Address 2100 RIVEREDGE PARKWAY,	SUITE 500		05 30 2014								
	City ATLANTA	State GA	Zip Code 30328	Transaction ID : SA11C.4332  Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.	C cod	0443168	1500.00								
	Name of Employer	Occupation		Contribution								
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1500.00									
В.			AL ACTION COMMITTEE	Date of Receipt								
	Mailing Address 1401 H STREET NW SUITE 120	00		06 04 2014								
	City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SA11C.4354								
	FEC ID number of contributing federal political committee.		0105981	Amount of Each Receipt this Period  2500.00								
	Name of Employer	Occupation		Contribution								
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 2500.00									
<u> </u>	Full Name (Last, First, Middle Initial) KOCH INDUSTRIES INC POLITICAL	ACTION	COMMITTEE (KOCHPAC	Date of Receipt								
	Mailing Address 600 14TH STREET, NW SUITE 800		,	06 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SA11C.4437  Amount of Each Receipt this Period								
	FEC ID number of contributing federal political committee.		0236489	1000.00								
Name of Employer Oo		Occupation		Contribution								
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00									
s	UBTOTAL of Receipts This Page (optional)			5000.00								
Т	OTAL This Period (last page this line number or	nly)										

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 OF 20 (check only one)
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  AX PAC	Statements mane name and a	ay not be sold or used by any penderess of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  NEW YORK LIFE INSURANCE COMP  Mailing Address 51 MADISON AVENUE  ROOM 1109  City  NEW YORK  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary  Other (specify)	State NY C Coo	Zip Code 10010 0158881	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  UNITED PARCEL SERVICE INC.  Mailing Address 55 GLENLAKE PARKWAY N  City  ATLANTA  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary  General  Other (specify)	State GA  C Coo	Zip Code 30328 0064766 Year-to-Date ▼	Date of Receipt  06 04 2014  Transaction ID: SA11C.4357  Amount of Each Receipt this Period  5000.00  Contribution
Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify)   Other (specify)	State  C Occupation Aggregate	Zip Code  Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y Y  Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)			10000.00
TOTAL This Period (last page this line numbe	r only)		28000.00

SCHEDULE B (FEC Form 3X)	Llos congrete cohertule	\(\alpha\)	IE NUMBER: PAGE 11 OF 20								
ITEMIZED DISBURSEMENTS	Use separate schedule for each category of the Detailed Summary Pag	ie Cilicol only	one) 22 23 24 25 28 28c 29								
Any information copied from such Reports and States		used by any pers	on for the purpose of soliciting contribution								
or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)  AX PAC	ne and address of any po	olitical committee to	solicit contributions from such committee								
Full Name (Last, First, Middle Initial)			Data of Dishamous and								
A. Aspect Consulting LLC			Date of Disbursement								
Mailing Address 8401 Excelsior Drive Suite 103			04 16 2014								
,	State Zip Code WI 53717		Transaction ID: SB21B.4376								
Madison Purpose of Disbursement	33/1/										
Compliance Consulting			Amount of Each Disbursement this Pe								
Candidate Name		Category/ Type	29.5								
Office Sought: House Disburser  Senate President	ment For: Primary Genera Other (specify) ▼	al									
State: District:											
Full Name (Last, First, Middle Initial)  B. Capitol Lounge			Date of Disbursement								
Mailing Address 231 Pennsylvania Ave SE			05 28 2014								
City	State Zip Code										
Washington	DC 20003		Transaction ID : SB21B.4379								
Purpose of Disbursement Event Catering			Amount of Each Disbursement this Pe								
Candidate Name		Category/ Type	960.0								
Office Sought:  House  Senate  President  State:  Disburser	ment For: Primary ☐ Genera Other (specify) ▼	ıl									
Full Name (Last, First, Middle Initial)  C. Capitol Lounge			Date of Disbursement								
Mailing Address 231 Pennsylvania Ave SE			05 28 Y 2014								
City Washington	State Zip Code DC 20003		Transaction ID : SB21B.4381								
Purpose of Disbursement Event Catering											
Candidate Name		Category/	Amount of Each Disbursement this Pe								
Office Sought: House Disburset	ment For:  Primary Genera  Other (specify) ▼	Type									
President State: District:	Carlor (opcomy)										

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 12 OF 20									
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 24 28c 28c	25 29 3							
Any information copied from such Reports and State or for commercial purposes, other than using the na											
NAME OF COMMITTEE (In Full)  AX PAC	me and address of any politic	ai committee to	Source Contributions HOIH SUCH	COMMINUES.							
Full Name (Last, First, Middle Initial)			5								
- CustomInk			Date of Disbursement								
Mailing Address 2910 District Ave			05 17	2014							
City	State Zip Code		Transaction ID : SB21B.43	377							
Fairfax Purpose of Disbursement	VA 22031										
Printing			Amount of Each Disburseme	ent this Period							
Candidate Name		Category/		0040.40							
		Type		2312.10							
Senate President	ement For:    Primary										
State: District:											
Full Name (Last, First, Middle Initial)			Data of Dishamanana								
Persuasion Partners Inc.			Date of Disbursement								
Mailing Address 106 E Doty Street #300			04 10	2014							
City	State Zip Code		Transaction ID : SB21B.4	372							
Madison Purpose of Disbursement	WI 53703										
Graphic Design			Amount of Each Disburseme	ent this Period							
Candidate Name		Category/ Type		500.00							
Office Sought:  House Senate President State: District:	ement For:  Primary General  Other (specify)										
Full Name (Last, First, Middle Initial) - Pineapple Grove Gifts			Date of Disbursement								
Mailing Address 2405 Leslie Avenue			06 22	2014							
City Alexandria	State Zip Code VA 22301		Transaction ID : SB21B.4	383							
Purpose of Disbursement Printing											
Candidate Name		Category/ Type	Amount of Each Disburseme	ent this Period 200.60							
Office Sought:  House Senate President  State: Disburse	ement For:  Primary General  Other (specify)	Туро									
l l											

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S	CHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 13 OF									20	
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			(check only			nly one)							
	_		Summary Page		X	21b		22		23		24	25		26
						27		28a		28b		28c	29		30b
	ly information copied from such Reports and Staten for commercial purposes, other than using the name														
$\setminus$	NAME OF COMMITTEE (In Full)														
$ \rangle$	AX PAC														
	Full Name (Last, First, Middle Initial)														
Α.	Poste Brasserie							ate o	f Di	sburse			YY		
	Mailing Address 555 8th Street						L	04	_		9	L	2014	_	
	City 5	State	Zip Code					Trans	cact	ion ID		B21B.4	122		
	Washington	DC	20004					irans	sact	ion ib	: 3	DZ I D.4	422		
	Purpose of Disbursement 6/22 CC Pmt: Event Catering						А	moun	it of	Each	Dis	bursem	ent this	Per	iod
	Candidate Name			С	atego Type	ry/				4		(T)	119	6.09	)
	Office Sought: House Disburser	nent For:			71		П	MEMO	э іті	EM1		,			
	Senate	Primary	General				· ·			•					
	President	Other (spe	cify) 🔻												
_	State: District:														
B	Full Name (Last, First, Middle Initial)						_	)ata a	f Di	sburse	mai	nt			
υ.	River Valley Bank												YY	- 1/	
	Mailing Address 101 Scott Street						L	06			22	/ 4	2014	- Y	
	,	State	Zip Code					Trans	sact	ion ID	) : S	B21B.4	382		
	Wausau Purpose of Disbursement	WI	54403												
	Credit Card Payment *See Itemization*						Α	moun	t of	Each	bursem	ent this	Per	riod	
	Candidate Name			Category/ Type				Ξ	3940.41					1	
	Office Sought: House Disbursen	nent For:													
	Senate	Primary	General	ral											
	President State: District:	Other (spe	cify) 🔻												
	Full Name (Last, First, Middle Initial)														
C.	River Valley Bank							ate o	f Di	sburse	eme	nt			
	Matter Address 1010 and							M = M	1	D		/ Y	Y Y	II Y	1
	Mailing Address 101 Scott Street						Ŀ	06	-		9		2014	-	J.
	City	State	Zip Code					Trans	eact	ion ID		B21B.4	387		
		WI	54403					IIaii	saci	IOII IL	. 3	DZ 1D.4	301		
	Purpose of Disbursement Credit Card Payment *See Itemization*			г	-										
	Candidate Name			C	atego	ry/	A	moun	it of	Each	Dis	bursem		-	
					Type		L			7		7	76	33.84	
	Office Sought: House Disburser														
	Senate President	Primary Other (spe	General												
	State: District:	Other (spe	City) $\blacktriangledown$												
Г	District.														_
8	UBTOTAL of Disbursements This Page (optional)					•			_	,		,	472	4.25	;
Γ.	OTAL This Desired (leak use on this line around														$\neg$
$L^1$	OTAL This Period (last page this line number only)									7		7		-	

## 17

SCHEDULE B (FEC Form 3X)	Han any control of the Co	FOR LINE	NUMBER:	PAGE 14 OF 20
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(Cricon orm)		
	Detailed Summary Page	21b	22 23 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) AX PAC				
Full Name (Last, First, Middle Initial)			5 . (5:1	
A. Walt Disney World			Date of Disbursem	
Mailing Address 1900 Park Fare			01 21	2014
	State Zip Code		Transaction ID :	SB21B.4420
Lake Buena Vista Purpose of Disbursement	FL 32830			
6/22 CC Pmt: Event Venue		L	Amount of Each D	isbursement this Period
Candidate Name		Category/		2744.32
Office Sought: House Disburser	ment For:	Туре		7
Senate President	Primary General Other (specify) ▼		[MEMO ITEM]	
State: District:				
Full Name (Last, First, Middle Initial)  B. Walt Disney World			Date of Disbursem	_
Mailing Address 1900 Park Fare			01 22	2014
Lake Buena Vista	State Zip Code FL 32830		Transaction ID :	SB21B.4421
Purpose of Disbursement 6/29 CC Pmt: Event Venue			Amount of Each D	isbursement this Period
Candidate Name		Category/ Type		783.84
Office Sought: House Disburser  Senate President  State: District:	ment For: Primary General Other (specify) ▼		[МЕМО ІТЕМ]	
Full Name (Last, First, Middle Initial)				
C.			Date of Disbursem	nent
Mailing Address			M M / D D	/
City	State Zip Code			
Purpose of Disbursement			Amount of Fook D	iishuussaant this Davisd
Candidate Name		Category/ Type		isbursement this Period
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify)	••		
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>		0.00
TOTAL This Period (last page this line number only)	)			10786.64

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 15 OF 20
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)		
	Detailed Summary Page	21b 27		24 25 26 28c 29 30b
	<u> </u>			
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
AX PAC				
Full Name (Last, First, Middle Initial)		1		
A. BOBBY SCHILLING FOR CONGI	RESS		Date of Disbursement	
			M M / D D /	Y Y Y Y Y Y
Mailing Address 367 AVENUE OF THE CITIES SU	JITE D		06 29	2014
City	State Zip Code			
EAST MOLINE	IL 61244		Transaction ID : SB2	3.4411
Purpose of Disbursement				
Contribution			Amount of Each Disbu	rsement this Period
Candidate Name		Category/		1000.00
Office Sought:	ement For:	Туре		.000.00
Senate	Primary General			
President	Other (specify)			
State: IL District: 17				
Full Name (Last, First, Middle Initial)				
B. CANTOR FOR CONGRESS			Date of Disbursement	
<del> </del>			M = M / D = D /	Y Y Y Y Y
Mailing Address PO BOX 17813			06 29	2014
City	State Zip Code		Transaction ID : SB2	23.4392
RICHMOND Purpose of Disbursement	VA 23226			
Contribution		· · ·	Amount of Each Disbu	rsement this Period
Candidate Name		Category/		
		Type		1000.00
Office Sought: House Disburse	ement For:			
Senate	Primary General			
President President	Other (specify) ▼			
State: VA District: 07  Full Name (Last, First, Middle Initial)				
C. CARL DEMAIO FOR CONGRESS	3		Date of Disbursement	
			M M / D D /	YYYY
Mailing Address PO BOX 27227			06 29	2014
City	Otata 7% O. I			
City SAN DIEGO	State Zip Code CA 92198		Transaction ID : SB2	3.4404
Purpose of Disbursement	J.			
Contribution			Amount of Each Disbu	rsement this Period
Candidate Name		Category/		1000 00
000		Type		1000.00
	ement For:			
Senate President	Primary General Other (specify) ▼			
State: CA District: 52	Silion (opposity)			
2 2. 02				
SUBTOTAL of Disbursements This Page (optional)				3000.00
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TOTAL This Period (last page this line number only	/)	·····•		

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 16 OF 20
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)		
	Detailed Summary Page	21b	22 X 23	24 25 26
[		27	28a 28b	28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
AX PAC				
<u>/</u>				
Full Name (Last, First, Middle Initial)			Date of Disbursemen	
A. CORY GARDNER FOR SENATE				
Mailing Address 9227 E. LINCOLN AVE., #200-23	4		06 29	2014
City	State Zip Code		Transaction ID : SE	323.4390
LONE TREE Purpose of Disbursement	CO 80124			
Contribution			Amount of Each Dish	oursement this Period
Candidate Name		Catagory	3. Zad.: 510k	
		Category/ Type		1000.00
Office Sought: House Disburse	ement For:			
Senate	Primary General			
President	Other (specify) ▼			
State: CO District: 04				
Full Name (Last, First, Middle Initial)  B. DOUG OSE FOR CONGRESS			Date of Disbursemen	nt
5. DOUG OSE FOR CONGRESS			M M / D D	/ Y Y Y Y Y
Mailing Address 9321 SILVERBEND LANE			06 29	2014
City	State Zip Code CA 95624		Transaction ID : SE	323.4398
ELK GROVE Purpose of Disbursement	CA 95624			
Contribution			Amount of Each Disk	oursement this Period
Candidate Name		Category/		1000.00
		Type		1000.00
	ement For:			
Senate President	Primary General Other (specify) ▼			
State: CA District: 07	Other (specify)			
Full Name (Last, First, Middle Initial)				
C. FRIENDS OF DAN LOGUE FOR	CONGRESS		Date of Disbursemen	nt
			M = M / D = D	/ Y   Y   Y   Y
Mailing Address PO BOX 984			06 29	2014
City	State Zip Code			
WILLOWS	CA 95988		Transaction ID : SE	323.4396
Purpose of Disbursement				
Contribution			Amount of Each Disk	oursement this Period
Candidate Name		Category/		1000.00
Office Sought:	ement For:	Туре		7
Senate	Primary General			
President	Other (specify)			
State: CA District: 03	· · · · · · · · · · · · · · · · · · ·			
SUBTOTAL of Disbursements This Page (optional)				3000.00
TOTAL This Period (last page this line number only	/)	•••••••		

SCHEDULE B (FEC Form 3X)				PAGE 17 OF 20
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(oricon oriny	•	
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30
Any information copied from such Reports and Statem				
or for commercial purposes, other than using the name	ne and address of any polit	cical committee to	solicit contributions fr	om such committee.
NAME OF COMMITTEE (In Full)				
AX PAC				
Full Name (Last, First, Middle Initial)				
A. FRIENDS OF JACK KINGSTON			Date of Disburseme	ent
AA-III			M M / D D	/
Mailing Address PO BOX 2133			06 29	2014
City	State Zip Code			3D00 400 /
SAVANNAH	GA 31402		Transaction ID : S	5B23.4394
Purpose of Disbursement Contribution			A was a second of the	oburo
Candidate Name			Amount of Each Di	sbursement this Period
Cartaluate Natife		Category/ Type		1000.00
Office Sought: House Disburser	nent For:	rype		
Senate	Primary General			
President	Other (specify)			
State: GA District: 11				
Full Name (Last, First, Middle Initial)			Data of Diri	ant
B. GORELL FOR CONGRESS			Date of Disburseme	
Mailing Address 2219 E THOUSAND OAKS BL, ST	 E 209		06 Z9	2014
,	State Zip Code		Transaction ID : \$	SB23.4400
THOUSAND OAKS Purpose of Disbursement	CA 91362			
Contribution			Amount of Each Di	sbursement this Period
Candidate Name		Category/		
		Type		1000.00
Office Sought: House Disburser				
Senate	Primary General			
State: CA District: 26	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. MARILINDA GARCIA FOR CONG	RESS		Date of Disburseme	ent
	- <del>-</del>		M   M / D   D	/ Y Y Y Y Y
Mailing Address PO BOX 821			06 29	2014
City	State Zip Code			
	NH 03079		Transaction ID:	SB23.4388
Purpose of Disbursement				
Contribution			Amount of Each Di	sbursement this Period
Candidate Name		Category/		1000.00
Office Sought:  House  Disburser	nent For:	Туре		7
Senate Disburser	Primary General			
President	Other (specify)			
State: NH District: 02	· 			
SUBTOTAL of Disbursements This Page (optional)		·····		3000.00
TOTAL TIL D. L. I. W. C.				
<b>TOTAL</b> This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)	Hoe concrete selectivity	FOR LINE I		PAGE 18 OF 20
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orleast orliny	(check only one)	
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30
Any information copied from such Reports and Statem				
or for commercial purposes, other than using the nam	ie and address of any politic	cai committee to	SOUCH CONTRIBUTIONS for	om such committee.
AX PAC				
Full Name (Last, First, Middle Initial)				
A. MOONEY FOR CONGRESS			Date of Disbursem	
Mailing Address P.O. BOX 1863			06 29	2014
,	State Zip Code		Transaction ID : \$	SB23 4415
	WV 25402		Transaction ID : (	JDZJ.44 17
Purpose of Disbursement Contribution			Amount of Each Di	isbursement this Period
Candidate Name		Category/ Type		1000.00
	nent For: Primary General Other (specify)			
State: MD District: 02	v e - m#/ - ▼			
Full Name (Last, First, Middle Initial)				
B. NESTANDE FOR CONGRESS			Date of Disburseme	
Mailing Address 2150 RIVER PLAZA DR. #150			06 29	2014
,	State Zip Code CA 95833		Transaction ID :	SB23.4402
Purpose of Disbursement Contribution	11130		Amount of Each Di	isbursement this Period
Candidate Name		Category/ Type		1000.00
President	nent For: Primary General Other (specify) ▼	.754		
State: CA District: 36  Full Name (Last, First, Middle Initial)				
C. PEDRO FOR CONGRESS			Date of Disbursem	_
Mailing Address PO Box 2854			06 29	2014
REDMOND	State Zip Code WA 98073		Transaction ID :	SB23.4418
Purpose of Disbursement CONTRIBUTION		· · · ·	Amount of Fach Di	isbursement this Period
Candidate Name		Category/ Type		1000.00
	nent For: Primary General Other (specify)	2000		
				2000.00
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>		3000.00
TOTAL This Period (last page this line number only).				

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 19	9 OF 20
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)		
	Detailed Summary Page	21b 27	22 X 23 24 2 28a 28b 28c 2	
[	<u> </u>			
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)	, , ,			
AX PAC				
Full Name (Last, First, Middle Initial)			B + (B)+	
A. RICK W. ALLEN FOR CONGRES	S		Date of Disbursement	
Mailing Address P. O. BOX 338			06 29 2014	
City	State Zip Code		Transaction ID : SB23.4406	
AUGUSTA	GA 30903		1141134511011 ID . 3D23.4400	
Purpose of Disbursement Contribution		l	Amount of Each Disbursement th	nis Period
Candidate Name		Ontrice	, another to Each Dispuisement th	
		Category/ Type	1	00.00
Office Sought: House Disburse	ment For:		,	
Senate	Primary General			
President	Other (specify) ▼			
State: GA District: 12				
Full Name (Last, First, Middle Initial)  B. SENGER FOR CONGRESS			Date of Disbursement	
- SEINGER FOR CONGRESS			M M / D D / Y Y	V V
Mailing Address PO BOX 4883			06 29 201	
City	State Zip Code		Transaction ID : SB23.4408	
NAPERVILLE Purpose of Disbursement	IL 60567			
Contribution			Amount of Each Disbursement th	nis Period
Candidate Name		Category/		000.00
		Type	1	000.00
	ment For:			
Senate President	Primary General			
State: IL District: 11	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
c. TOM MACARTHUR FOR CONGR	RESS INC.		Date of Disbursement	
			M = M / D = D / Y = Y	Y Y
Mailing Address PO BOX 225			06 29 2014	4
City	State Zip Code			
COLONIA	NJ 07067		Transaction ID : SB23.4413	
Purpose of Disbursement				
Contribution		L	Amount of Each Disbursement th	nis Period
Candidate Name		Category/	1	000.00
Office Sought: House Disburse	mont For:	Туре		200.00
Senate	ment For:    Primary   General			
President	Other (specify)			
State: District:	· · · · · · · · · · · · · · · · · · ·			
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TOTAL This Period (last page this line number only	')		15	00.00

Transaction ID: SB29.4432  Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of Soliciting contributions from such committee.  NAME OF COMMITTEE (in Full)  AX PAC  Full Name (Last, First, Middle Initial)  Republican Party of Marathon County  Mailing Address PO Box 834  City  Wausau  Purpose of Disbursement  Candidate Name  Category/ Type  District:  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Perioc  Category/ Type  Office Sought: House  Disbursement For:  Candidate Name  Category/ Type  Date of Disbursement this Perioc  Category/ Type  Amount of Each Disbursement this Perioc  Category/ Type  Amount of Each Disbursement this Perioc  Category/ Type  Amount of Each Disbursement this Perioc  Category/ Type  Office Sought: House  Disbursement For:  Candidate Name  Category/ Type  Office Sought: House  Disbursement For:  Candidate Name  Category/ Type  Office Sought: House  Disbursement For:  Senate  President  Contribution:  Category/ Type  Office Sought: House  Disbursement For:  Senate  President  Contribution:  Category/ Type  Office Sought: House  Disbursement For:  Senate  President  Other (specify) ▼  End Name (Last, First, Middle Initial)  Date of Disbursement this Perioc  Category/ Type  Amount of Each Disbursement this Perioc  Category/ Type  Office Sought: House  Disbursement For:  Senate  President  Other (specify) ▼  Full Name (Last, First, Middle Initial)	SCHEDULE B (FEC Form 3X)	Han annual colored ()	FOR LINE NUMBER: PAGE 20 OF 20			
Detailed Summary Page	TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	te schedule(s) (check only one)			
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  AX PAC  Full Name (Last, First, Middle Initial)  Office Sought:   House   Disbursement   Di						
NAME OF COMMITTEE (In Full)  AX PAC  Full Name (Last, First, Middle Initial)  Republican Party of Marathon County  Mailing Address PO Box 834  City Wausau  Purpose of Disbursement Contribution: Not for FEA  Cardidate Name  Category/ Type  Office Sought:  House District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State: District:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Category/ Type  Office Sought:  House President District:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Office Sought:  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Amount of Each Disbursement this Period  Other (specify)   Amount of Each Disbursement this Period  Other (specify)   Amount of Each Disbursement this Period  Other (specify)   Other (s						
Amount of Each Disbursement    Category/ Type	NAME OF COMMITTEE (In Full)					
Mailing Address  City  Wussus  With  State  Zip Code  With  State  Zip Code  With  State  Category'  Type  Office Sought:  House  Senate  President  Category'  Type  Office Sought:  Full Name (Last, First, Middle Initial)  State:  District:  Full Name (Last, First, Middle Initial)  State:  District:  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Period  Category'  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Period  Category'  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Period  Category'  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Category'  Office Sought:  Full Name (Last, First, Middle Initial)  Category'  Type  Office Sought:  Full Name (Last, First, Middle Initial)  Category'  Office Sought:  Full Name (Last, First, Middle Initial)  Category'  Office Sought:  Full Name (Last, First, Middle Initial)  Category'  Office Sought:  Full Name (Last, First, Middle Initial)  Category'  Office Sought:  Full Name (Last, First, Middle Initial)  Category'  Office Sought:  Full Name (Last, First, Middle Initial)  Category'  Office Sought:  Category'  Office Sought:  Sanate  President  Category'  Office Sought:  Category'  Office S	,			Data of Dichuras	ont	
Mailing Address PO Box 834  City State Zip Code Wil 54402  Furpose of Disbursement Contribution: Not for FEA Candidate Name  City Senate President Other (specify) ▼  Category' Type  Senate President Other (specify) ▼  Category' Type  Cat	• Republican Party of Marathon Coul	nty				
Wausau Purpose of Disbursement Contribution: Not for FEA Candidate Name Category/ Type  Office Sought: House Senate Primary General City State Zip Code  Purpose of Disbursement Category/ Type  Date of Disbursement this Period Category/ Type  Amount of Each Disbursement  Date of Disbursement this Period Category/ Type  Amount of Each Disbursement  Amount of Each Disbursement this Period Category/ Type  Office Sought: House Disbursement For: Senate President Other (specify) ▼  Date of Disbursement this Period Category/ Type  Date of Disbursement this Period Category/ Type  Office Sought: House Disbursement For: Category/ Category/ Type  Office Sought: House Disbursement For: Category/ Category/ Type  Date of Disbursement this Period Category/ Type  Amount of Each Disbursement this Period Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Amount of Each Disbursement this Period Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼	Mailing Address PO Box 834					
Purpose of Disbursement Contribution: Not for FEA Candidate Name  Office Sought:				Transaction ID :	SB29.4432	
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Office Sought:	Candidate Name			Table 5. Edon Di		
Amount of Each Disbursement  Candidate Name  Office Sought: House Senate Prisaident  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement For: Senate Primary General Other (specify) ▼  Mailing Address  City State Zip Code  Purpose of Disbursement  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate President Other (specify) ▼  State: District: Primary General Other (specify) ▼  State: District: District: Primary General Other (specify) ▼	Senate	Primary General	туре			
Date of Disbursement  City  State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City  State Zip Code  Purpose of Disbursement  Category/ Type  Office Sought: House Primary General Other (specify) ▼  Amount of Each Disbursement this Period  Date of Disbursement  Amount of Each Disbursement  Category/ Type  Office Sought: House President Other (specify) ▼  State: District: General Other (specify) ▼						
Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Amount of Each Disbursement this Period  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District: President Other (specify) ▼	Full Name (Last, First, Middle Initial)  3.					
Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Amount of Each Disbursement this Period  Amount of Each Disbursement  Category/ Type  Amount of Each Disbursement  Amount of Each Disbursement  Category/ Type  Office Sought: House Primary General Other (specify) ▼  State: District:	Mailing Address			M = M / D = D	/ Y Y Y Y	
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Candidate Name  Category/ Type  Amount of Each Disbursement this Period  Amount of Each Disbursement  M. M. / D. D. / Y.Y.Y.Y.Y.  Amount of Each Disbursement  Amount of Each Disbursement  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:	City	State Zip Code				
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Amount of Each Disbursement this Period Category/ Type  Other (specify) ▼  State: District:	Purpose of Disbursement			Amount of Each Di	isbursement this Period	
Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Amount of Each Disbursement this Period Category/ Type  Office Sought: House Primary General Other (specify) ▼  State: District:	Candidate Name			Table 5. Edon Di	7 0100	
Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:	Senate President	Primary General	. , , , ,			
Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:						
City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  State: District:	2.				_	
Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)   State: District:  Amount of Each Disbursement this Period  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Other (specify)   State: District:	Mailing Address			M = M / D D	/	
Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  State: District:  Amount of Each Disbursement this Period General Other (specify) ▼	City	State Zip Code				
Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼  State: District:	Purpose of Disbursement					
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼  State: District:	Candidate Name		Category/ Type			
SUBTOTAL of Disbursements This Page (optional)	Senate President	Primary General				
SOBTOTAL OF DISDUISEMENTS THIS Page (Optional)	SURTOTAL of Dichurcements This Dags (antional)				3000.00	
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